U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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	FOR	UM ·	MBER FILE	D 1	NMBER EXTRA	RATE (1)	FEE (S)		0.275.44	
	SIC FEE CFR 1.16(a), (b),	or fell	Ņ/A		N/A	NA	150.00	┥ .	RATE (\$)	300.0
Ē	ARCH FEE CFR 1 16(N. (1), o		N/A		N/A.	- I	\$250	┥.		
X	AMINATION FE	Ε	N/A .		N/A	- NA	\$100	-	N/A	\$500
07 CFR 1.16(q), (p), or (q))		a (q)) ·				X\$ 25		4	NIA	\$200
17 CFR 1.16(II) IDEPENDENT CLAIMS		AIMS		20 =	 		<u> </u>	.OR	X\$50	•
,	CFR 1.16(h))	<u>. </u>		83 = .		X100		_i	X200 ,	.
Ì	PLICATION 5121 E CFR 1.16(6))	E sheets is \$250 addition	pecification and drawings exceed 100 of paper, the application size fee due (\$125 for small entity) for each al 50 sheets or fraction thereof. See C. 41(a)(1)(G) and 37 CFR 1.16(s).							
J	LTIPLE DEPEN	DENT CLAIM PR	E8ENT (37	CFR 1.16(0)		+180=		1	+360=	-
1	he difference in	column 1 is less t	han zero, d	enter "0" in cotu	: Imn 2.	TOTAL	1	1	TOTAL	1 1 1 1
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	12-18-06	(Column 1)		(Column HIGHEST NUMBER PREVIOUS PAID FOR	PRESENT EXTRA	SMALL RATE (1)	ADDI- TIONAL	OR	OTHE SMALL RATE (\$)	ADD:
		(Column 1) CLAIMS REMAINING AFTER	Minus	HIGHEST NUMBER PREVIOUS	PRESENT EXTRA	7	ADDI-		RATE (\$)	ADD TION
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	Total (37 CFR 1.10(3)) Independent (37 CFR 1.10(3)) Application Siz	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	Minus 16(s))	HIGHEST NUMBER PREVIOUSI PAID FOR	PRESENT EXTRA	X\$ 25	ADDI- TIONAL	OR OR	SMALL (5) X\$50 X200	ADD TION
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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to completed including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Tradamark Office, U.S. Depentment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.